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## BIB DATA SHEET

CONFIRMATION NO. 1901

| SERIAL NUMBER                                                                                                                                                                                                                                                                                                                                               | FILING or 371(c)<br>DATE                                                                                          | CLASS                                        | GROUP ART UNIT                                               | ATTORNEY DOCKET<br>NO. |                 |                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------|--------------------------------------------------------------|------------------------|-----------------|-----------------------|
| 10/647,217                                                                                                                                                                                                                                                                                                                                                  | 08/26/2003                                                                                                        | <del>257</del><br>714                        | 2117                                                         | SON-2810               |                 |                       |
| <b>APPLICANTS</b><br>Yoshitaka Kayukawa, Kanagawa, JAPAN;<br>Tetsuya Aoki, Tokyo, JAPAN;<br>Takahiro Hamaguchi, Kanawaga, JAPAN;<br>Noriyuki Oshima, Kanagawa, JAPAN;<br><b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br>JAPAN P2002-277285 09/24/2002<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>11/22/2003 |                                                                                                                   |                                              |                                                              |                        |                 |                       |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                | 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                | <input type="checkbox"/> Met after Allowance | STATE OR<br>COUNTRY                                          | SHEETS<br>DRAWINGS     | TOTAL<br>CLAIMS | INDEPENDENT<br>CLAIMS |
| Verified and<br>Acknowledged                                                                                                                                                                                                                                                                                                                                | /DIPAKKUMAR B<br>GANDHI/<br>Examiner's Signature                                                                  | Initials                                     | JAPAN                                                        | 4                      | 12              | 7                     |
| <b>ADDRESS</b><br>RADER FISHMAN & GRAUER PLLC<br>LION BUILDING<br>1233 20TH STREET N.W., SUITE 501<br>WASHINGTON, DC 20036<br>UNITED STATES                                                                                                                                                                                                                 |                                                                                                                   |                                              |                                                              |                        |                 |                       |
| <b>TITLE</b><br>Semiconductor integrated circuit and method for testing same                                                                                                                                                                                                                                                                                |                                                                                                                   |                                              |                                                              |                        |                 |                       |
| <b>FILING FEE<br/>RECEIVED</b><br>1236                                                                                                                                                                                                                                                                                                                      | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                              | <input type="checkbox"/> All Fees                            |                        |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                              | <input type="checkbox"/> 1.16 Fees (Filing)                  |                        |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                              | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                        |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                              | <input type="checkbox"/> 1.18 Fees (Issue)                   |                        |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                              | <input type="checkbox"/> Other _____                         |                        |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                              | <input type="checkbox"/> Credit                              |                        |                 |                       |